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CONFIRMATION NO. 1440

SERIAL NUMBER 09/877,933	FILING OR 371(c) DATE 06/07/2001 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 014907001910
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**APPLICANTS**

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**\*\* CONTINUING DATA**

This application is a DIV of 09/158,180 09/21/1998 ABN

**\*\* FOREIGN APPLICATIONS****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 07/05/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> MPEI after allowance
Verified and Acknowledged	Examiner's Signature Initials

**ADDRESS**

20350

**TITLE**

Diagnostic assays for detection of Cryptosporidium parvum

FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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